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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10688447 | <b>Applicant(s)/Patent Under Reexamination</b><br>NYKOLUK ET AL. |
|  | <b>Examiner</b><br>Tri M Mai               | <b>Art Unit</b><br>3781  |

| ORIGINAL           |                                   |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                      |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |                      | NON-CLAIMED |  |  |  |  |  |  |  |
| 190                |                                   | 115      |  |  |  | A                            | 4 | 5 | C | 13 / 26 (2008.01.01) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 190                | 18A                               |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 16                 | 113.1                             |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |

|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 30       | 15    | 46       |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 31       | 16    | 47       |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 32       | 17    | 48       |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 33       | 18    | 49       |       |          |       |          |       |          |       |          |       |          |       |          |
| 5   | 34       | 19    | 50       |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 35       | -     | 51       |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 36       | -     | 52       |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 37       | 20    | 53       |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 38       | 21    | 54       |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 39       | 22    | 55       |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 40       | 23    | 56       |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 41       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 42       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 43       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 44       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 14  | 45       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

|                                |  |                       |  |
|--------------------------------|--|-----------------------|--|
| NONE                           |  | Total Claims Allowed: |  |
| (Assistant Examiner)           |  | 23                    |  |
| (Date)                         |  |                       |  |
| /Tri M Mai/                    |  | 09/27/2010            |  |
| Primary Examiner.Art Unit 3781 |  | O.G. Print Claim(s)   |  |
| (Primary Examiner)             |  | 1                     |  |
|                                |  | O.G. Print Figure     |  |
|                                |  | 1, 6                  |  |